U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 88-257, as amended, Falsare to comply may result in criminal prosecution, lines, or civil penalties as provided by 29 U.S.C 499 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 2570	2. Fiscal Year Covered From:
	1 / 1 / 2004; Through: 12 / 31 / 2004
3. Name and address of person filing.	4. Name, file number, and address of labor organization.
Name Carl K Wilson	Name Asbestos Workers Local Union #53
	Lebor Organization File Number 011373
P.O. Box, Bidg., Room No., Fany	P.O. Box, Building and Room Number, if any:Room 200
Street 1161 Rosemeadow Loop	Street 2001 Voterans Memorial Bivd.
City slidell	City Kenner
State Louisiana ZIP Code + 4 70460	State Louisiana ZIP Code + 4 70062-5466
5. Position in labor organization. Taft Hartley Funds Union Trus	licee
······································	
Enter appropriate data below if, during the past flecal year, you or your spo (except as specified in the exclu	use or minor child directly or indirectly had any of the following interests whose set forth in the instructions):
A. Heid an interest in, engaged in transactions (including loans) with, or monetary value from an amployer whose employees your organization.	derived income or other economic banefit of
6. Name and address of Employer (including trade name, if any).	7.s. Nature of Interest, Transaction, or Income.
Name :	
Trade Name, if any:	
Trace reports, a ony.	
P.O. Box, Bldg., Room No., if any	7 h Amount
Street	r.a. Pelikusit.
year	
City	<u> </u>
State ZIP Code + 4	
Sign	ature
\$5. Signature and verification. The undersigned declares, under penalty of submitted in this report (including the information contained in any accompany undersigned's knowledge and belief, true, correct, and complete. (See the second complete.)	ing documents), has been examined by the signatory and is, to the best of the
Signed Signed	On 3-77-05 185-643-330. Date Telephone Number

Name of Person Filing Carl Wilson	File Number U-
Held an interest in or derived income or economic benefit with monetary valuables an interest in or derived income or economic benefit with monetary valuables and interest of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is actively part of which consists of buying from or selling or leasing directly or indicating with your labor organization or with a trust in which your labor organization.	vise dealing with the business vely seeking to represent, or irectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business desis with:
Name Asbestos Workers Local Union#53 Welfare Fund	F \ Z':
Trade Name, if any.	a. Labor Organization
P.O. Box, Bidg., Room No., if any 201	b. Trust
Speet 2001 Veterans Memorial Blvd.	C, Enthuyer
Ску Колия	
State Louisians ZP Code + 4	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	The Local Union negotiates a Collective Bargaining Agreement with several area contractors. Through the
Trade Name, If any:	CBA, contributions are paid by the signatory contractors to the Fund on behalf of covered employees. 2004 annual contributions
P.O. Box, Skilg., Room No., if any	::
Street	
City	11.b. Approximate dollar value of such dealing. \$964, 167
State ZIP Code + 4	12.a. Nature of Interest held or income received. Registration fee to IF conference 12/01/2004- 12/04/2004-\$915 Lost Time wages for attenting IF conference and trustess meetings \$696 Reimbursement expenses IF Conference-\$154
	12.b. Amount. \$1,565
 Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money 	r parts A and B above) or other thing of velue.
13.a. Name and address of Employer or Labor Relations Consultant (Induding trade name, if any).	14.s. Nature of payment
Name	
Trade Name, if any:	
P.O. Box, Bidg., Room No., if any	
Street	
СНу	
State ZIP Code + 4	
	14 b. Amount of payment.
13.b. is the Business an Employer or Consultant ?	

			·····	······································	***************************************		***************************************	******	
Name of	Person Fläng Carl	Wilson				ļ	File Number U _*		

Part S Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, sailing or leasing to, or otherwise dealing with the business of an amployer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or sailing or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trest in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Asbestos Workers Local Union#53 Pension Fund	a. Labor Organization	
Trade Name, if any:	D, Trust	
P.O. Box, Bidg., Room No., If any 201	U. irvat	
Street 2001 Veterans Memorial Blvd.	c. Employer	
City Konner		
State Louisiana ZIP Code + 4 70062-5466		
10. If 9.b. or 9.c. is checked give truet or employer's name.	11.a. Nature of such dealing.	
Name Trade Name, if any:	The Local Union negotiates a Colle Agreement with several area contra the CBA, contributions are paid by contractors to the Fund on behalf	ctors. Through the signatory
ECOSTO LOGICACIO E ORIA.	employees. 2004 annual contribution	
P.O. Box, Bidg., Room No., if any		
Street		
City City		
Stele ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$1,018,973
	12.a. Nature of interest held or income received.	· · · · · · · · ·
	Lost Time wages for attenting trus	tea's meetings
	12.b. Amount.	\$372

Name of Person Filing Carl Will	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Businese deals with:	
Name Ambestos Workers Local #53 JAC	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bidg., Room No., If any 200	b. Trust	
Street 2001 Veterans Memorial Blvd.	c. Employer	
City Kanner		
State Louisiana ZIP Code + 4 70062-5466		
10. If 9.5, or 9.c, is checked give truet or employer's name.	11.a. Nature of such desting.	
Name	The Local Union negotiates a Colle Agreement with several area contra	ctive Bargaining ctors. Through
Trade Name, if any:	the CBA, contributions are paid by contractors to the Fund on behalf employees. 2004 annual contributions	the signatory of covered
P.O. Sox, Sidg., Room No., if any		
Street		•
City	100 A	
		1
State ZIP Code + 4	11.b. Approximate dollar value of such dealing.	\$34,675:
	12.a. Nature of interest held or income received. See Attached explanation	·
	See accorded expression	
		1
		:
		.
	12.b. Amount,	\$3,085

I received lost time pay for attending Joint Apprenticeship Committee Meetings on 8/19, & 11/21 as a union trustee representative.

I received lost time pay for the instructing classes for the Joint Apprenticeship Program on 3/12, 5/24, & 6/7.

I received lost time pay, travel expense, meals, lodging, and registration fees for attending the International Apprenticeship Conference held in Pittsburgh, PA. June 28 – July 3 as a delegate for the Joint Apprenticeship Committee.

I have no interest in or receive income from the Joint Apprenticeship Committee.